

EXHIBIT “D”

Transcript of the Testimony of:
JOSEPH CORBI

DATE: OCTOBER 29, 2009

CASE: CORBI -VS- HARRAH'S CASINO

DIAMOND COURT REPORTING
Phone:856-589-1107
Fax:856-589-4741
Email: dcr.diamond@comcast.net

IN THE UNITED STATES DISTRICT COURT

NEW JERSEY, CAMDEN VICINAGE

- - -
YVONNE CORBI and : NO. 1:08-CV-05875
JOSEPH CORBI : RBK-JS
:
V. :
:
MARINA ASSOCIATES d/b/a: :
HARRAH'S CASINO HOTEL :
ATLANTIC CITY :

- - -
Thursday, October 29, 2009
- - -

Oral Deposition of JOSEPH CORBI, held in
the Law Offices of Mintzer, Sarowitz, Zeris, Ledva &
Meyers, LLP, Centre Square, West Tower, 1500 Market
Street, Suite 4100, Philadelphia, PA 19102,
commencing at approximately 12:50 p.m. on the above
date, before Patricia M. Fuydal, Court Reporter and
Notary Public.

- - -
DIAMOND COURT REPORTING
4 Emerson Lane
Sewell, New Jersey 08080
(856) 589-1107
FAX (856) 589-4741

Page 2

APPEARANCES:

FELDMAN, SHEPHERD, WOHLGELERNTER,
TANNER, WEINSTOCK, DODIG
BY: MARK W. TANNER, ESQUIRE
25TH FLOOR
1845 WALNUT STREET
PHILADELPHIA, PA 19103
(215) 567-8300
Counsel for the Plaintiffs

MINTZER, SAROWITZ, ZERIS, LEDVA &
MEYERS, LLP

BY: LAWRENCE M. KELLY, ESQUIRE
CENTRE SQUARE, WEST TOWER
1500 MARKET STREET, SUITE 4100
PHILADELPHIA, PA 19102
(215) 735-7200

Counsel for the Defendant

ALSO PRESENT:

Yvonne Corbi

Page 4

(It is hereby stipulated and
agreed by and between counsel for the
respective parties that sealing and
certification are waived; and that
all objections, except as to the form of
the questions, are reserved until the
time of trial.)

... JOSEPH CORBI, after having
been first duly sworn and/or affirmed,
was examined and testified as follows:

BY MR. KELLY:

Q. Are you all set, Mr. Corbi?

A. Ready.

Q. Good afternoon, Mr. Corbi.

A. Good afternoon.

Q. I introduced myself earlier. My name
is Larry Kelly and I represent an entity commonly
known as Harrah's Casino in Atlantic City. I'm here
to take your deposition based on events that took
place back in December of 2006. You were here this
morning for your wife's deposition, correct?

A. Yes.

Page 3

INDEX

WITNESS	PAGE
JOSEPH CORBI	
Examination by Mr. Kelly	4

(There were no exhibits marked at this time.)

Page 5

Q. I gave your wife certain instructions
before her deposition, did you hear those?

A. Yes, I did.

Q. Did you understand them?

A. Yes, I did understand them.

Q. Would you like me to repeat them?

A. Yes, I would.

Q. Absolutely. If at any time you don't
understand my question, it doesn't make sense to you
or you don't hear it, anything like that, please,
it's very important that you tell me so that I can
get you a question you can answer and you can give me
an answer to the best of your ability. Okay?

A. Okay.

Q. Please wait until I completely finish
my question before you begin to respond so the court
reporter can take it down in order. Okay?

A. Got it.

Q. Also, please respond verbally as oppose
to an uh-huh or nod of the head, things like that.
We don't want the court reporter to have to interpret
your answer, we want to make sure she gets what
you're trying to convey accurately. Okay?

A. Okay.

Page 6

1 Q. If at any time you need to take a
2 break, please feel free, just let us know.
3 A. Okay.
4 Q. Are you currently on any medications or
5 anything that would affect your ability to recall
6 events or understand my questioning or anything like
7 that?
8 A. No.
9 Q. What medication are you on currently?
10 A. Synthroid, Spiriva.
11 Q. What was the second one?
12 A. Spiriva. Cozaar, Zocor, Advair.
13 Q. Any others?
14 A. Aspirin every other day, full strength.
15 Multiple vitamin every day.
16 Q. Anything else?
17 A. That's all.
18 Q. What's your date of birth?
19 A. January 8, 1942.
20 Q. And where do you live today?
21 A. 131 Colonial Park Drive, Springfield,
22 Pennsylvania 19064.
23 Q. And your wife indicated that it's just
24 the two of you living there and you have lived there

Page 7

1 for over 40 years; is that correct?
2 A. Yes, that's correct.
3 Q. I understand that you sold a printing
4 business earlier this year; is that correct?
5 A. Yes.
6 Q. Have you been employed since then?
7 A. No, I have not.
8 Q. Did you personally miss any time from
9 work because of the events from December of 2006?
10 A. No.
11 MR. KELLY: Mark, again I'm assuming no
12 wage loss?
13 MR. TANNER: No wage loss.
14 BY MR. KELLY:
15 Q. I asked your wife questions about her
16 medical history prior to December of '06 and I will
17 ask you similar questions. And I'm taking into
18 account approximately the 10 year period from 1996 to
19 2006. How would you describe your health generally
20 during that period?
21 A. From '96 to 2006?
22 Q. Yes.
23 A. Pretty good.
24 Q. Any major health issues?

Page 8

1 A. COPD, that's very recent.
2 Q. When was that diagnosed?
3 A. Four years ago approximately.
4 Q. Prior to December of '06?
5 A. Four years from this date is what I'm
6 saying, yes, that would have been prior to '06.
7 Q. Other than COPD any other major health
8 issues?
9 A. No.
10 Q. Do you require oxygen at all?
11 A. No.
12 Q. At any point in your life were you a
13 smoker?
14 A. Yes.
15 Q. And roughly what time frame in your
16 life?
17 A. About 16 years old started.
18 Q. Up until?
19 A. August of this year.
20 Q. And what amount would you smoke?
21 A. At the end I was smoking about a pack
22 and a half a day.
23 Q. How about 10 years ago?
24 A. 10 years ago maybe half a pack.

Page 9

1 Q. So it increased until the end?
2 A. That's correct.
3 Q. Dr. Harkin is your family doctor?
4 A. Yes, he is.
5 Q. How long has he been your family
6 doctor?
7 A. About 1994.
8 Q. Did you see Dr. Harkin personally for
9 any symptoms or problems you had relative to the
10 December 2006 incident?
11 A. Yes.
12 Q. Did you see any doctors or medical
13 providers other than Dr. Harkin for any symptoms or
14 illnesses?
15 A. No.
16 Q. How many times total did you see
17 Dr. Harkin wherein it was discussed the issues that
18 you had stemming from the December 2006 Atlantic City
19 visit?
20 A. Once.
21 Q. Do you remember the date of that one?
22 A. No, I don't remember the date. No, I'm
23 sorry.
24 Q. Would it be safe to assume it was

Page 10

1 January '07?

2 A. Yes, January '07 definitely.

3 Q. I'm going to ask you about your
4 symptoms and how this affected you first, then we'll
5 get back into the visit and the things you consumed.
6 When did you first get sick or notice that something
7 was wrong when you were in Atlantic City?

8 A. Late afternoon on Saturday.

9 Q. December 30th?

10 A. December 30th.

11 Q. Was it before or after you met up with
12 your wife after the afternoon of gambling?

13 A. A little before.

14 Q. So what were you feeling that
15 afternoon?

16 A. Lot of queasiness and rumblings in my
17 stomach.

18 Q. When you say a little bit before you
19 met up, what time would you say approximately you
20 first started to feel the queasiness?

21 A. Half hour to an hour or so.

22 Q. Would that be sometime between 2:00 and
23 3:00 that afternoon?

24 A. I suppose, yes.

Page 11

1 Q. Did you have any vomiting or diarrhea
2 that day?

3 A. No.

4 Q. Did you ever have any vomiting or
5 diarrhea because of this?

6 A. Yes.

7 Q. When did it start?

8 A. Sunday.

9 Q. What time?

10 A. I don't remember. It was earlier in
11 the morning. I'm an early riser.

12 Q. Were you in Atlantic City or back in
13 Pennsylvania when you first vomited or had diarrhea?

14 A. At home.

15 Q. How long did the vomiting and diarrhea
16 last for you?

17 A. I would say I had maybe three instances
18 where it occurred.

19 Q. Spread out?

20 A. Spread out over the day.

21 Q. Over one day?

22 A. Over the Sunday, yes.

23 Q. Was there a point in time when all of
24 the symptoms left, that is the queasiness and the

Page 12

1 rumbling and the vomiting and diarrhea?

2 A. Yes. I guess sometime Monday
3 afternoon, around Monday noontime, somewhere in
4 there.

5 Q. January 1st?

6 A. If that's what Monday was.

7 Q. The next day?

8 A. The next day.

9 Q. And after that Monday afternoon did you
10 ever have anymore vomiting, diarrhea or symptoms that
11 you attribute to the events from Atlantic City?

12 A. No.

13 Q. So at some point that Monday and maybe
14 even into Tuesday you got better, at least from the
15 way you were feeling not necessarily medically?

16 A. Okay. Yes.

17 Q. So your symptoms were gone is what I'm
18 saying?

19 A. Yes.

20 Q. At some point did Dr. Harkin diagnose
21 you with salmonella?

22 A. Yes.

23 Q. Do you remember when that was?

24 A. I believe it was a week after Yvonne

Page 13

1 was diagnosed. He said he wanted to see me. He
2 wanted me to go for the test.

3 Q. Were you diagnosed before or after or
4 during her hospitalization at Springfield?

5 A. Before.

6 Q. As a result of being diagnosed, were
7 you given any type of treatment, medications or
8 anything like that?

9 A. No.

10 Q. I want to go back, Mr. Corbi, if I can,
11 to take you through those days leading up to January
12 1st. I will start with that Thursday, December 28th.
13 I understand from your wife's testimony that that was
14 a typical weekday in that you worked that day; is
15 that right?

16 A. That's correct.

17 Q. How were you feeling on Thursday,
18 December 28th?

19 A. Good.

20 Q. Do you remember what you had for
21 breakfast?

22 A. Yes.

23 Q. What did you have?

24 A. Cheerios some raisins and milk.

Page 14

1 Q. What kind of milk?
 2 A. Lactaid, lactose free.
 3 Q. So this is different milk than what
 4 your wife would drink --
 5 A. Yes.
 6 Q. -- back at that time?
 7 A. Yes.
 8 Q. You said Cheerios and raisins?
 9 A. Cheerios and regular raisins out of the
 10 box.
 11 Q. Did you have that at home?
 12 A. No.
 13 Q. Where did you have that?
 14 A. At work.
 15 Q. Where did you obtain the Cheerios,
 16 raisins and milk?
 17 A. More than likely Acme.
 18 Q. Did you keep them at work?
 19 A. Yes.
 20 Q. Did you have some type of refrigerator
 21 there that you could keep food?
 22 A. Yes.
 23 Q. About what time did you consume those
 24 items?

Page 15

1 A. 5:30.
 2 Q. In the morning?
 3 A. Yes.
 4 Q. When is the next time you had something
 5 to eat?
 6 A. Quarter to 12.
 7 Q. Around lunchtime?
 8 A. Yes.
 9 Q. What did you have?
 10 A. Usually had crackers, Ritz Crackers
 11 with peanut butter and usually an orange, an apple
 12 and a banana.
 13 Q. Do you remember having these items
 14 specifically on December 28th?
 15 A. Yes. Well, no, that's not true.
 16 That's what I would normally have. If it was my
 17 normal day that's what I had, but to say that's what
 18 I had --
 19 Q. You'd be surprised if you didn't?
 20 A. I'd be shocked and everyone else would
 21 be.
 22 Q. Where did you consume those?
 23 A. At the shop.
 24 Q. Is that some items you probably

Page 16

1 purchased at a supermarket as well?
 2 A. That is correct.
 3 Q. When's the next time you had something
 4 to eat?
 5 A. That evening.
 6 Q. Do you know what time?
 7 A. Is that the evening --
 8 Q. This is Thursday night.
 9 A. That would be the pizza night?
 10 Q. Yes. That was the night the neighbor
 11 passed away.
 12 A. That would be the pizza.
 13 Q. How much pizza did you have?
 14 A. Two slices probably, that is my normal
 15 consumption.
 16 Q. Would it have been from the same place
 17 your wife got her piece?
 18 A. Oh, yes.
 19 Q. And do you remember about what time you
 20 got it?
 21 A. Sometime after five, around five or
 22 little after five.
 23 Q. Any other food or beverage consumed by
 24 you on Thursday, December 28th, that we haven't

Page 17

1 talked about?
 2 A. Just coffee.
 3 Q. When?
 4 A. Well, I have coffee in the morning, I
 5 should have mentioned that. And I usually had a cup
 6 of coffee before I went to bed, decaf.
 7 Q. What time would it have been about?
 8 A. About 8:30.
 9 Q. How did you take your coffee back then?
 10 A. Pretty much black, maybe a drop of
 11 cream. But black for all intents and purposes.
 12 Q. Any other food or beverage on Thursday,
 13 December 28th, we haven't talked about?
 14 A. No.
 15 Q. Let's move to Friday, December 29th,
 16 this is the day that you left for Atlantic City.
 17 What did you have for breakfast that morning?
 18 A. Cheerios, raisins, milk, coffee.
 19 Q. What time?
 20 A. 5:30.
 21 Q. Where?
 22 A. The shop.
 23 Q. Same source?
 24 A. Yes.

Page 18

1 Q. Acme?
 2 A. Yes.
 3 Q. What did you have to eat next
 4 chronologically that day?
 5 A. 11:45, crackers and peanut butter,
 6 orange, apple and a banana. That would be my normal
 7 lunch.
 8 Q. Again, items bought by you at a store?
 9 A. That's correct.
 10 Q. And kept at work?
 11 A. Yes.
 12 Q. Chronologically what's the next thing
 13 you had to eat or drink that day?
 14 A. That was Friday?
 15 Q. This is Friday.
 16 A. That's when we went to Reflections and
 17 I believe they tell me I had a tuna sandwich, I don't
 18 remember.
 19 Q. Let me back up a second. Did you have
 20 anything else to eat before you left for Atlantic
 21 City?
 22 A. No.
 23 Q. Did you make any stops on the way down
 24 to Atlantic City?

Page 19

1 A. No.
 2 Q. The next thing you ate would have been
 3 at Harrah's in Atlantic City?
 4 A. That's correct.
 5 Q. That was at Reflections; is that
 6 correct?
 7 A. Yes.
 8 Q. About what time is that?
 9 A. 4:00, 4:30 somewhere in there.
 10 Q. Now, you said that they told you you
 11 had a tuna sandwich, who is they?
 12 A. I remember from interrogatories that we
 13 did.
 14 Q. I don't want you to tell me anything
 15 that your lawyer -- you mentioned to your lawyer.
 16 Other than your attorney, did anyone else tell you or
 17 remind you what you had to eat at Reflections Cafe
 18 that day?
 19 A. No.
 20 Q. Sitting here today do you have a
 21 specific recollection of what you ate?
 22 A. No, I do not.
 23 Q. So based on some information provided
 24 at least in part by your wife, you believe that you

Page 20

1 had a tuna sandwich?
 2 A. That's correct.
 3 Q. Does that sound right, does that sound
 4 like something you might have ordered?
 5 A. Yes.
 6 Q. Have you had tuna sandwiches at
 7 Reflections before?
 8 A. Yes.
 9 Q. Would you order anything special with
 10 it or how it was made?
 11 A. No.
 12 Q. What would you normally have with it,
 13 if anything, cole slaw, French fries, potato chips?
 14 A. Whatever came with the sandwich.
 15 Whatever way they presented it.
 16 Q. So you wouldn't specify, it would be as
 17 delivered?
 18 A. It was as delivered.
 19 Q. Do you have a recollection of any
 20 beverages consumed at that time at Reflections Cafe?
 21 A. Tanqueray.
 22 Q. What did you have with your Tanqueray?
 23 A. Rocks and an olive.
 24 Q. Any other beverages at Reflections?

Page 21

1 A. Water.
 2 Q. Anything else?
 3 A. No.
 4 Q. Chronologically what's the next item
 5 that you had or ate or drank that day?
 6 A. You're talking again about Friday?
 7 Q. Yes. The day you arrived at
 8 Reflections.
 9 A. We normally got a cup of coffee and a
 10 Danish or something like that at Harrah's.
 11 Q. What time was that?
 12 A. Usually around 9:00.
 13 Q. Do you remember specifically what if
 14 anything you got on Friday, December 29th?
 15 A. No, I do not.
 16 Q. But your normal routine would have been
 17 as your wife described, to get a cookie or a Danish
 18 or something like that?
 19 A. Exactly.
 20 Q. And if that in fact was followed that
 21 day what was it normally that you would have? Would
 22 you have the cookie or Danish or both?
 23 A. Whatever we bought.
 24 Q. And you would have a decaf coffee?

Page 22

1 A. Yes.
 2 Q. With just a hint of cream?
 3 A. That's correct.
 4 Q. Where did you get that?
 5 A. Club Cappuccino I believe it was
 6 called.
 7 Q. Any other food or beverage consumed on
 8 Friday, December 29th, that we have not spoken about?
 9 A. Not that I can recall.
 10 Q. Let's talk about the next day,
 11 Saturday, December 30th. This is the day that you
 12 first started to feel ill, correct?
 13 A. Correct.
 14 Q. Do you remember what time you got up?
 15 A. Around 5:00.
 16 Q. And do you remember what time your wife
 17 got up?
 18 A. When I came back to the room -- I had
 19 left the room and when I came back to the room she
 20 was up. So I really don't know what time she got up.
 21 Q. What did you do during the time from
 22 the time you got up until you came back to the room?
 23 A. I got washed and dressed. I would
 24 normally go down and get a cup of coffee. Take a

Page 23

1 walk outside, even though it was cold I would still
 2 go out. Come back in, get the newspaper. Sit down
 3 in whatever spot was convenient, read the newspaper
 4 for awhile. Check the time and see if I thought she
 5 was up yet and go up to the room, bring coffee and a
 6 bagel up to the room.
 7 Q. Other than coffee did you consume any
 8 food prior to going back up to the room?
 9 A. No.
 10 Q. When you said you would walk, where
 11 would you walk?
 12 A. Around the outside of the casino.
 13 Q. I think there's a dock or peer back
 14 there?
 15 A. There's a peer back there. I would
 16 walk around the front and all the way around the
 17 side. Wherever you were able to walk around the
 18 casino.
 19 Q. But basically stay on Harrah's
 20 property?
 21 A. Absolutely, yes.
 22 Q. Did you come in contact with anything
 23 when you were out there, animals, plants or anything
 24 like that?

Page 24

1 A. I usually talk to the valet guys,
 2 that's about it.
 3 Q. Now, your wife had estimated that it
 4 was around 8:00 when she got up and you were there
 5 with the bagel and the coffee; does that sound about
 6 right?
 7 A. Sounds about right.
 8 Q. What did you consume then, half a
 9 bagel?
 10 A. Half a bagel and the coffee.
 11 Q. What did you have next to eat?
 12 A. Breakfast at Reflections.
 13 Q. Let me back up a second. Where did you
 14 get the bagel and coffee earlier that morning?
 15 A. Club Cappuccino.
 16 Q. What time were you at Reflections?
 17 A. 11:00, 11:30.
 18 Q. And what did you have for breakfast on
 19 Saturday, December 30th at Reflections?
 20 A. Bagel, eggs, potatoes come with the
 21 meal, and white toast.
 22 Q. Anything on your toast?
 23 A. No.
 24 Q. No butter or anything?

Page 25

1 A. No butter.
 2 Q. How did you have your eggs?
 3 A. Over medium.
 4 Q. Anything with them, like on them,
 5 ketchup --
 6 A. Black pepper.
 7 Q. Anything else?
 8 A. No.
 9 Q. Anything to drink?
 10 A. Coffee, water.
 11 Q. What's the next thing that you had to
 12 eat or drink chronologically that day?
 13 A. I had a roll with ham and cheese on it.
 14 Q. About what time?
 15 A. 6:30, 7:00 maybe.
 16 Q. P.m.?
 17 A. Yes.
 18 Q. Now, this is several hours after you
 19 had already started feeling queazy and some rumbling,
 20 correct?
 21 A. Yes.
 22 Q. Were you able to eat the roll with the
 23 ham and cheese?
 24 A. Yes.

Page 26

1 Q. Where did you get that?
 2 A. Roll I got from a bakery in Brigantine.
 3 MRS. CORBI: Can I tell him the name of
 4 the bakery?
 5 MR. KELLY: This is not a quiz.
 6 MRS. CORBI: I'm sorry.
 7 BY MR. KELLY:
 8 Q. It will come to you I'm sure. So you
 9 left Harrah's property sometime early Saturday
 10 evening and went to Brigantine?
 11 A. Yes.
 12 Q. And you made a stop there and you got a
 13 roll. Did you get the ham and cheese there as well?
 14 A. No.
 15 Q. Where did you get the ham and cheese?
 16 A. Wawa.
 17 Q. So you made two stops?
 18 A. Three.
 19 Q. So you went to a bakery, you went to a
 20 Wawa and what's the third stop?
 21 A. Church.
 22 Q. And did you go to church by yourself?
 23 A. Yes.
 24 Q. Your wife was back at the hotel room?

Page 27

1 A. Yes.
 2 Q. What type of cheese was with the ham?
 3 A. Swiss.
 4 Q. Where did you consume that?
 5 A. In the hotel room.
 6 Q. So you brought it back with you?
 7 A. Yes.
 8 Q. Any beverages?
 9 A. No.
 10 Q. Anything on your ham and cheese like
 11 mayonnaise or mustard?
 12 A. Mustard.
 13 Q. Any other food or beverage on Saturday
 14 December 30th that we haven't talked about?
 15 A. No.
 16 Q. What time did you go to bed?
 17 A. Don't remember. I think I just fell
 18 asleep watching television.
 19 Q. Did you have the cookie or Danish
 20 routine?
 21 A. No.
 22 Q. Your wife indicated you left early,
 23 maybe as early as 7:00 a.m. on Sunday; is that your
 24 recollection?

Page 28

1 A. Sounds right.
 2 Q. How were you feeling when you woke up
 3 in Atlantic City on Sunday, December 31st?
 4 A. Ill. I wasn't feeling good.
 5 Q. Were you able to eat before you left
 6 Atlantic City?
 7 A. No.
 8 Q. Did you eat at all that day?
 9 A. I don't recall.
 10 Q. And that's the day your symptoms kicked
 11 in.
 12 A. Yes.
 13 Q. And you first had vomiting or diarrhea
 14 back in Pennsylvania?
 15 A. Yes. It seems so far away when you say
 16 Pennsylvania.
 17 Q. Earlier you told me about the period
 18 that went from Sunday, December 31st, into Monday,
 19 January 1st, maybe Tuesday, January 2nd. You told me
 20 you weren't feeling well, you had different episodes
 21 of vomiting and diarrhea, et cetera. Other than that
 22 24 to 48 to 72 hour period, did you have any other
 23 illness or symptoms that you attributed to the
 24 Atlantic City visit?

Page 29

1 A. No.
 2 Q. You told me there was only the one
 3 visit to Dr. Harkin which these issues were
 4 discussed; is that correct?
 5 A. Yes.
 6 Q. You did not have any type of medical
 7 procedures or anything?
 8 A. No.
 9 Q. Your wife indicates that you guys have
 10 no pets; is that correct?
 11 A. That's correct.
 12 Q. Did you have any contact with pets or
 13 animals in the days leading up to your trip to
 14 Atlantic City in December '06?
 15 A. No.
 16 Q. Travel anywhere other than what you
 17 have described?
 18 A. No.
 19 Q. Again, these questions are relative to
 20 that Thursday and Friday in late December. How about
 21 any stores? Were you actually at the Acme on those
 22 days or had you been there previously?
 23 A. I was not on those days, no.
 24 Q. Any grocery store or farmer's market?

Page 30

- 1 A. Wawa in the morning.
 2 Q. Anything else?
 3 A. No.
 4 Q. Did you go swimming or were you in a
 5 pool at all?
 6 A. No.
 7 Q. Any gardening?
 8 A. No.
 9 Q. Same question as I asked your wife
 10 about washing hands. Describe your routine with
 11 that, that Thursday and Friday?
 12 A. Well, the business itself was a dirty
 13 business, so depending on what you were doing you had
 14 to constantly wash your hands before you went to
 15 another step in the process. If you're doing this
 16 step before you move to the next step you'd have to
 17 wash your hands. So washing hands was a regular
 18 habit.
 19 Q. What was your role back in December of
 20 '06 in the business?
 21 A. I was in production, all phases of
 22 production.
 23 Q. How many employees worked there?
 24 A. At the time there were four, three.

Page 31

- 1 Q. Did you wear gloves at all?
 2 A. During certain processes, yes.
 3 Q. Has anyone ever, other than your
 4 attorney, has anyone ever told you or represented to
 5 you what caused you to get sick?
 6 A. Ask me that again.
 7 Q. Did anyone, other than your attorney,
 8 ever tell you what they believed caused you to get
 9 sick back in the end of December of '06?
 10 A. I don't quite understand that question.
 11 Q. We know that you were sick for that 24
 12 to 72 hour period after you were in Atlantic City.
 13 A. Okay.
 14 Q. Did anybody, doctor or any other type
 15 of professional other than your attorney, tell you
 16 what made you sick, why you got sick?
 17 A. I was told the salmonella made me sick.
 18 Q. Did anyone tell you how you contracted
 19 that?
 20 A. Only that it was possibly from or
 21 usually found in poultry products.
 22 Q. Other than a general description like
 23 that, did anyone tell you specifically, give you the
 24 when, the where and the why if you will?

Page 32

- 1 A. No.
 2 Q. I assume from your earlier answers that
 3 there's nothing bothering you today that you
 4 attribute to those events of December '06; is that
 5 correct?
 6 A. Yes, that would be correct.
 7 Q. I assume you have no plans for any
 8 future medical treatment, correct, for these
 9 symptoms, these issues?
 10 A. That's correct.
 11 Q. Your wife indicated that during the
 12 period from mid January of '07 through mid May of
 13 '07, she was limited in the amount of time that she
 14 could get to work, do you remember that?
 15 A. Absolutely.
 16 Q. What's your recollection of how often
 17 she was there and what she was able to do?
 18 A. Very limited to what she could do. Do
 19 the most important things she had to do and left.
 20 Q. Who filled in for her if anyone?
 21 A. Myself and my daughters, two of my
 22 daughters.
 23 Q. Those daughters, did they normally work
 24 for the business or was this just a fill-in?

Page 33

- 1 A. It was a fill-in. One worked for
 2 awhile with us and then left.
 3 Q. How about after the procedure in May of
 4 2007, what was your wife's attendance at work like
 5 then?
 6 A. Spotty.
 7 Q. How long did that last?
 8 A. I can't say, I really don't know.
 9 Q. Did it ever change from being spotty?
 10 A. Oh, yes, back to her normal hours.
 11 Q. Was that sometime in 2007?
 12 A. I don't really remember exactly when
 13 she came back on a regular basis. It was awhile.
 14 Q. But whatever time it was she came back,
 15 once she came back was she back for good?
 16 A. What do you mean good?
 17 Q. She was initially spotty, then after a
 18 period of time she came back essentially full time,
 19 did it stay that way up until you got rid of the
 20 business or did it go back to spotty again?
 21 A. Yes, it did. Back to full time.
 22 Q. Once she got back she stayed?
 23 A. Right.
 24 Q. I want to talk about the night that she

Page 34

1 went to the emergency room. Describe what you
2 remember that day and that evening, this is in
3 January of 2007?

4 A. The night she went to the emergency
5 room was hell, that's what it was. She was in so
6 much pain. I came home and she was screaming in
7 pain. She said she wanted me to call the doctor --
8 no, call 911. The paramedics came. The discussion
9 was where she wanted to go and they said she had no
10 choice, she had to go to Springfield Hospital, so
11 they took her to Springfield Hospital.

12 We got there. They put her in a room.
13 They told me to wait outside. I waited outside for a
14 couple of hours. I went and asked the nurse where my
15 wife was. She said she was back there. I said can I
16 see her. She said yeah. I went in to see her and
17 she was just screaming in pain. All she wanted was
18 something to ease the pain.

19 About maybe three or two in the
20 morning, something like that, I think they gave her
21 something for pain but I'm not sure about that. They
22 told me they were going to admit her and wanted to do
23 an MRI I believe or CAT scan, I'm not sure which one
24 they wanted to do, something. I don't know if they

Page 35

1 did that that night or not or the next day.

2 When they finally took her out of the
3 emergency room I didn't see her and I went home. I
4 tried to sleep for a little bit. I went to work. I
5 called the hospital the next morning and they said
6 everything was looking good. And then they called me
7 maybe around 9:30, 10:00.

8 Q. A.m. or p.m.?

9 A. A.m. They said you have to come to the
10 hospital, your wife is going to have emergency
11 surgery.

12 Q. This was the following morning, the
13 12th?

14 A. Yes.

15 Q. Did she have surgery that day?

16 A. Yes.

17 Q. Your wife described the scarring that
18 she has on her abdomen. What is your recollection of
19 the largest scar that she has from procedures
20 stemming from the December '06 incident?

21 A. She described it very accurately.

22 Q. She said she had six of them, is that
23 what you remember?

24 A. I wouldn't argue with her. If she says

Page 36

1 there's six then there's six.

2 Q. Well, I understand that, but my
3 question is more what's your recollection of how many
4 there are?

5 A. To be honest with you she covers her
6 stomach up so I really can't stop and count.

7 Q. So you're not sure?

8 A. Exactly.

9 Q. Did you have any conversations during
10 that late December 2006 visit to Atlantic City with
11 anyone you understood to be employed by Harrah's
12 about the sickness you and/or your wife had?

13 A. Ask me that again.

14 Q. While you were in Atlantic City during
15 the trip where you got sick, did you tell anybody who
16 worked for Harrah's that you or your wife got sick?

17 A. No.

18 Q. Since you left on December 31, '06,
19 have you had any conversations with anyone you
20 understood to be employed by Harrah's about the
21 sickness you and your wife had?

22 A. I talked to Dominic Tedeschi one time.

23 Q. And approximately when was that?

24 A. I don't remember, it was after the

Page 37

1 surgery.

2 Q. Was it in 2007 that you spoke to him?

3 A. Yes, 2007.

4 Q. How did you talk to him, by phone, in
5 person?

6 A. Phone call.

7 Q. And tell me what you remember from that
8 conversation?

9 A. I remember absolutely nothing. Only
10 that he called and I spoke to him and he asked how
11 things were.

12 Q. He called you?

13 A. I don't remember that. I'm pretty sure
14 he called me but I could have called him.

15 Q. Other than that conversation by phone
16 with Dominic, any other communication between you and
17 anyone you understood to be employed by Harrah's
18 about these events?

19 A. No.

20 MR. TANNER: When you say
21 communication, I want to define that a little
22 more. Would that include leaving messages?

23 MR. KELLY: Sure.

24 BY MR. KELLY:

Page 38

1 Q. Did you leave messages for anybody at
2 Harrah's?
3 A. Yvonne had asked me to call and talk to
4 Dominic.
5 Q. About this incident?
6 A. About how she was doing and things like
7 that, yes. And from what I remember there was no
8 response from him, maybe that's why he called me back
9 later on. I don't really recall.
10 Q. When you left messages did you leave it
11 on some type of electronic recording device like
12 voice mail?
13 A. Yes.
14 Q. Do you remember how specific you were
15 in messages?
16 A. I'm usually very brief in my messages.
17 Dominic, it's Joe Corbi, call me back, please.
18 Q. Do you remember whether you got into
19 specifics about why you were calling?
20 A. On the message?
21 Q. Yes.
22 A. No, I don't remember.
23 Q. But at some point there was a
24 communication between you and Dominic?

Page 39

1 A. Yes.
2 Q. How many times have you been back to
3 Harrah's since December 30th?
4 A. Zero.
5 Q. How many times have you been back to
6 Atlantic City?
7 A. Since --
8 Q. This incident happened at the end of
9 '06.
10 A. 12, 15 times maybe.
11 Q. Where have you gone, what location,
12 what property?
13 A. Trump Marina.
14 Q. All the time?
15 A. Yes.
16 Q. Has your wife gone with you each of the
17 times?
18 A. Yes.
19 Q. Have you spent the night each of the
20 times at least one night?
21 A. Yes.
22 Q. Other than the one phone conversation
23 with Dominic, have you spoken to him at all about any
24 issues since January 1st of '07?

Page 40

1 A. No.
2 Q. Has anyone at Harrah's called or tried
3 to contact you guys about any issues about why you
4 don't come down anymore or about the health issues or
5 anything like that?
6 A. You said you guys...
7 Q. You or your wife that you're aware of?
8 A. No. No one contacted me.
9 Q. Mr. Corbi, have you understood my
10 questions today?
11 A. Yes, I have.
12 MR. KELLY: Those are all the questions
13 I have. Thank you.
14 (Witness excused.)
15 (Proceedings concluded at 1:40
16 p.m.)

Page 41

CERTIFICATE

I HEREBY CERTIFY that the
proceedings and objections are contained
fully and accurately in the stenographic
notes taken by me upon the foregoing
matter on October 29, 2009, and that this
is a true and correct transcript of the
same.

Patricia M. Fuydal

Patricia M. Fuydal

Court Reporter and Notary Public



(The foregoing certification of
this transcript does not apply to any
reproduction of the same by any means,
unless under the direct control and/or
supervision of the certifying reporter.)

<p>A</p> <p>abdomen 35:18</p> <p>ability 5:13 6:5</p> <p>able 23:17 25:22 28:5 32:17</p> <p>absolutely 5:8 23:21 32:15 37:9</p> <p>account 7:18</p> <p>accurately 5:23 35:21 41:4</p> <p>Acme 14:17 18:1 29:21</p> <p>admit 34:22</p> <p>Advair 6:12</p> <p>affect 6:5</p> <p>affirmed 4:10</p> <p>afternoon 4:16,17 10:8,12,15,23 12:3,9</p> <p>ago 8:3,23,24</p> <p>agreed 4:2</p> <p>amount 8:20 32:13</p> <p>and/or 4:10 36:12 41:21</p> <p>animals 23:23 29:13</p> <p>answer 5:12,13,22</p> <p>answers 32:2</p> <p>anybody 31:14 36:15 38:1</p> <p>anymore 12:10 40:4</p> <p>APPEARANCES 2:1</p> <p>apple 15:11 18:6</p> <p>apply 41:19</p> <p>approximately 1:17 7:18 8:3 10:19 36:23</p> <p>argue 35:24</p> <p>arrived 21:7</p> <p>asked 7:15 30:9 34:14 37:10 38:3</p> <p>asleep 27:18</p> <p>Aspirin 6:14</p> <p>ASSOCIATES 1:6</p> <p>assume 9:24 32:2,7</p> <p>assuming 7:11</p> <p>ate 19:2,21 21:5</p>	<p>Atlantic 1:7 4:20 9:18 10:7 11:12 12:11 17:16 18:20 18:24 19:3 28:3,6 28:24 29:14 31:12 36:10,14 39:6</p> <p>attendance 33:4</p> <p>attorney 19:16 31:4 31:7,15</p> <p>attribute 12:11 32:4</p> <p>attributed 28:23</p> <p>August 8:19</p> <p>aware 40:7</p> <p>awhile 23:4 33:2,13</p> <p>a.m 27:23 35:8,9</p> <p>B</p> <p>back 4:22 10:5 11:12 13:10 14:6 17:9 18:19 22:18 22:19,22 23:2,8 23:13,15 24:13 26:24 27:6 28:14 30:19 31:9 33:10 33:13,14,15,15,18 33:20,21,22 34:15 38:8,17 39:2,5</p> <p>bagel 23:6 24:5,9 24:10,14,20</p> <p>bakery 26:2,4,19</p> <p>banana 15:12 18:6</p> <p>based 4:21 19:23</p> <p>basically 23:19</p> <p>basis 33:13</p> <p>bed 17:6 27:16</p> <p>believe 12:24 18:17 19:24 22:5 34:23</p> <p>believed 31:8</p> <p>best 5:13</p> <p>better 12:14</p> <p>beverage 16:23 17:12 22:7 27:13</p> <p>beverages 20:20,24 27:8</p> <p>birth 6:18</p> <p>bit 10:18 35:4</p> <p>black 17:10,11 25:6</p> <p>bothering 32:3</p>	<p>bought 18:8 21:23</p> <p>box 14:10</p> <p>break 6:2</p> <p>breakfast 13:21 17:17 24:12,18</p> <p>brief 38:16</p> <p>Brigantine 26:2,10</p> <p>bring 23:5</p> <p>brought 27:6</p> <p>business 7:4 30:12 30:13,20 32:24 33:20</p> <p>butter 15:11 18:5 24:24 25:1</p> <p>C</p> <p>Cafe 19:17 20:20</p> <p>call 34:7,8 37:6 38:3,17</p> <p>called 22:6 35:5,6 37:10,12,14,14 38:8 40:2</p> <p>calling 38:19</p> <p>CAMDEN 1:2</p> <p>Cappuccino 22:5 24:15</p> <p>casino 1:7 4:20 23:12,18</p> <p>CAT 34:23</p> <p>caused 31:5,8</p> <p>Centre 1:15 2:9</p> <p>certain 5:1 31:2</p> <p>CERTIFICATE 41:1</p> <p>certification 4:4 41:18</p> <p>CERTIFY 41:2</p> <p>certifying 41:22</p> <p>cetera 28:21</p> <p>change 33:9</p> <p>Check 23:4</p> <p>Cheerios 13:24 14:8,9,15 17:18</p> <p>cheese 25:13,23 26:13,15 27:2,10</p> <p>chips 20:13</p> <p>choice 34:10</p> <p>chronologically 18:4,12 21:4</p>	<p>25:12</p> <p>church 26:21,22</p> <p>City 1:7 4:20 9:18 10:7 11:12 12:11 17:16 18:21,24 19:3 28:3,6,24 29:14 31:12 36:10 36:14 39:6</p> <p>Club 22:5 24:15</p> <p>coffee 17:2,4,6,9,18 21:9,24 22:24 23:5,7 24:5,10,14 25:10</p> <p>cold 23:1</p> <p>cole 20:13</p> <p>Colonial 6:21</p> <p>come 23:2,22 24:20 26:8 35:9 40:4</p> <p>commencing 1:17</p> <p>commonly 4:19</p> <p>communication 37:16,21 38:24</p> <p>completely 5:15</p> <p>concluded 40:15</p> <p>constantly 30:14</p> <p>consume 14:23 15:22 23:7 24:8 27:4</p> <p>consumed 10:5 16:23 20:20 22:7</p> <p>consumption 16:15</p> <p>contact 23:22 29:12 40:3</p> <p>contacted 40:8</p> <p>contained 41:3</p> <p>contracted 31:18</p> <p>control 41:21</p> <p>convenient 23:3</p> <p>conversation 37:8 37:15 39:22</p> <p>conversations 36:9 36:19</p> <p>convey 5:23</p> <p>cookie 21:17,22 27:19</p> <p>COPD 8:1,7</p> <p>Corbi 1:4,4,13 2:13 3:5 4:9,14,16 13:10 26:3,6</p>	<p>38:17 40:9</p> <p>correct 4:23 7:1,2,4 9:2 13:16 16:2 18:9 19:4,6 20:2 22:3,12,13 25:20 29:4,10,11 32:5,6 32:8,10 41:7</p> <p>counsel 2:5,11 4:2</p> <p>count 36:6</p> <p>couple 34:14</p> <p>court 1:1,18,22 5:16,21 41:14</p> <p>covers 36:5</p> <p>Cozaar 6:12</p> <p>crackers 15:10,10 18:5</p> <p>cream 17:11 22:2</p> <p>cup 17:5 21:9 22:24</p> <p>currently 6:4,9</p> <p>D</p> <p>D 3:2</p> <p>Danish 21:10,17,22 27:19</p> <p>date 1:18 6:18 8:5 9:21,22</p> <p>daughters 32:21,22 32:23</p> <p>day 6:14,15 8:22 11:2,20,21 12:7,8 13:14 15:17 17:16 18:4,13 19:18 21:5,7,21 22:10 22:11 25:12 28:8 28:10 34:2 35:1 35:15</p> <p>days 13:11 29:13 29:22,23</p> <p>decaf 17:6 21:24</p> <p>December 4:22 7:9 7:16 8:4 9:10,18 10:9,10 13:12,18 15:14 16:24 17:13 17:15 21:14 22:8 22:11 24:19 27:14 28:3,18 29:14,20 30:19 31:9 32:4 35:20 36:10,18 39:3</p>
--	--	--	--	---

Defendant 2:11 define 37:21 definitely 10:2 delivered 20:17,18 depending 30:13 deposition 1:13 4:21,23 5:2 describe 7:19 30:10 34:1 described 21:17 29:17 35:17,21 description 31:22 device 38:11 diagnose 12:20 diagnosed 8:2 13:1 13:3,6 DIAMOND 1:22 diarrhea 11:1,5,13 11:15 12:1,10 28:13,21 different 14:3 28:20 direct 41:21 dirty 30:12 discussed 9:17 29:4 discussion 34:8 DISTRICT 1:1 dock 23:13 doctor 9:3,6 31:14 34:7 doctors 9:12 DODIG 2:2 doing 30:13,15 38:6 Dominic 36:22 37:16 38:4,17,24 39:23 Dr 9:3,8,13,17 12:20 29:3 drank 21:5 dressed 22:23 drink 14:4 18:13 25:9,12 Drive 6:21 drop 17:10 duly 4:10 d/b/a 1:6	E 3:2 earlier 4:18 7:4 11:10 24:14 28:17 32:2 early 11:11 26:9 27:22,23 ease 34:18 eat 15:5 16:4 18:3 18:13,20 19:17 24:11 25:12,22 28:5,8 eggs 24:20 25:2 electronic 38:11 emergency 34:1,4 35:3,10 Emerson 1:22 employed 7:6 36:11 36:20 37:17 employees 30:23 entity 4:19 episodes 28:20 ESQUIRE 2:3,8 essentially 33:18 estimated 24:3 et 28:21 evening 16:5,7 26:10 34:2 events 4:21 6:6 7:9 12:11 32:4 37:18 exactly 21:19 33:12 36:8 Examination 3:6 examined 4:11 excused 40:14 exhibits 3:14	fill-in 32:24 33:1 finally 35:2 finish 5:15 first 4:10 10:4,6,20 11:13 22:12 28:13 five 16:21,21,22 FLOOR 2:3 followed 21:20 following 35:12 follows 4:11 food 14:21 16:23 17:12 22:7 23:8 27:13 foregoing 41:5,18 form 4:5 found 31:21 four 8:3,5 30:24 frame 8:15 free 6:2 14:2 French 20:13 Friday 17:15 18:14 18:15 21:6,14 22:8 29:20 30:11 fries 20:13 front 23:16 full 6:14 33:18,21 fully 41:4 future 32:8 Fuydal 1:18 41:13	guys 24:1 29:9 40:3 40:6	increased 9:1 indicated 6:23 27:22 32:11 indicates 29:9 information 19:23 initially 33:17 instances 11:17 instructions 5:1 intents 17:11 interpret 5:21 interrogatories 19:12 introduced 4:18 issues 7:24 8:8 9:17 29:3 32:9 39:24 40:3,4 item 21:4 items 14:24 15:13 15:24 18:8
	F	G	H	J
	fact 21:20 family 9:3,5 far 28:15 farmer's 29:24 FAX 1:24 feel 6:2 10:20 22:12 feeling 10:14 12:15 13:17 25:19 28:2 28:4,20 FELDMAN 2:2 fell 27:17 filled 32:20	gambling 10:12 gardening 30:7 general 31:22 generally 7:19 give 5:12 31:23 given 13:7 gloves 31:1 go 13:2,10 22:24 23:2,5 26:22 27:16 30:4 33:20 34:9,10 going 10:3 23:8 34:22 35:10 good 4:16,17 7:23 13:19 28:4 33:15 33:16 35:6 grocery 29:24 guess 12:2	habit 30:18 half 8:22,24 10:21 24:8,10 ham 25:13,23 26:13,15 27:2,10 hands 30:10,14,17 30:17 happened 39:8 Harkin 9:3,8,13,17 12:20 29:3 Harrah's 1:7 4:20 19:3 21:10 23:19 26:9 36:11,16,20 37:17 38:2 39:3 40:2 head 5:20 health 7:19,24 8:7 40:4 hear 5:2,10 held 1:13 hell 34:5 hint 22:2 history 7:16 home 11:14 14:11 34:6 35:3 honest 36:5 hospital 34:10,11 35:5,10 hospitalization 13:4 hotel 1:7 26:24 27:5 hour 10:21,21 28:22 31:12 hours 25:18 33:10 34:14	January 6:19 10:1 10:2 12:5 13:11 28:19,19 32:12 34:3 39:24 Jersey 1:2,23 Joe 38:17 JOSEPH 1:4,13 3:5 4:9
			I	K
			ill 22:12 28:4 illness 28:23 illnesses 9:14 important 5:11 32:19 incident 9:10 35:20 38:5 39:8 include 37:22	keep 14:18,21 Kelly 2:8 3:6 4:13 4:19 7:11,14 26:5 26:7 37:23,24 40:12 kept 18:10 ketchup 25:5 kicked 28:10 kind 14:1 know 6:2 16:6 22:20 31:11 33:8 34:24 known 4:20
E				L
				Lactaid 14:2 lactose 14:2 Lane 1:22 largest 35:19

Larry 4:19
late 10:8 29:20
36:10
Law 1:14
LAWRENCE 2:8
lawyer 19:15,15
leading 13:11 29:13
leave 38:1,10
leaving 37:22
Ledva 1:14 2:7
left 11:24 17:16
18:20 22:19 26:9
27:22 28:5 32:19
33:2 36:18 38:10
Let's 17:15 22:10
life 8:12,16
limited 32:13,18
little 10:13,18
16:22 35:4 37:21
live 6:20
lived 6:24
living 6:24
LLP 1:15 2:8
location 39:11
long 9:5 11:15 33:7
looking 35:6
loss 7:12,13
Lot 10:16
lunch 18:7
lunchtime 15:7

M

M 1:18 2:8 41:13
mail 38:12
major 7:24 8:7
Marina 1:6 39:13
Mark 2:3 7:11
marked 3:14
market 1:15 2:9
29:24
matter 41:6
mayonnaise 27:11
meal 24:21
mean 33:16
means 41:20
medical 7:16 9:12
29:6 32:8
medically 12:15
medication 6:9

medications 6:4
13:7
medium 25:3
mentioned 17:5
19:15
message 38:20
messages 37:22
38:1,10,15,16
met 10:11,19
Meyers 1:15 2:8
mid 32:12,12
milk 13:24 14:1,3
14:16 17:18
Mintzer 1:14 2:7
Monday 12:2,3,6,9
12:13 28:18
morning 4:23
11:11 15:2 17:4
17:17 24:14 30:1
34:20 35:5,12
move 17:15 30:16
MRI 34:23
Multiple 6:15
mustard 27:11,12

N

N 3:2
name 4:18 26:3
necessarily 12:15
need 6:1
neighbor 16:10
New 1:2,23
newspaper 23:2,3
night 16:8,9,10
33:24 34:4 35:1
39:19,20
nod 5:20
noontime 12:3
normal 15:17 16:14
18:6 21:16 33:10
normally 15:16
20:12 21:9,21
22:24 32:23
Notary 1:19 41:14
notes 41:5
notice 10:6
nurse 34:14

O

objections 4:5 41:3

obtain 14:15
occurred 11:18
October 1:10 41:6
Offices 1:14
Oh 16:18 33:10
Okay 5:13,14,17,23
5:24 6:3 12:16
31:13
old 8:17
olive 20:23
once 9:20 33:15,22
oppose 5:19
Oral 1:13
orange 15:11 18:6
order 5:17 20:9
ordered 20:4
outside 23:1,12
34:13,13
oxygen 8:10

P

PA 1:16 2:4,10
pack 8:21,24
PAGE 3:4
pain 34:6,7,17,18
34:21
paramedics 34:8
Park 6:21
part 19:24
parties 4:3
passed 16:11
Patricia 1:18 41:13
peanut 15:11 18:5
peer 23:13,15
Pennsylvania 6:22
11:13 28:14,16
pepper 25:6
period 7:18,20
28:17,22 31:12
32:12 33:18
person 37:5
personally 7:8 9:8
pets 29:10,12
phases 30:21
Philadelphia 1:16
2:4,10
phone 37:4,6,15
39:22
piece 16:17

pizza 16:9,12,13
place 4:22 16:16
Plaintiffs 2:5
plans 32:7
plants 23:23
please 5:10,15,19
6:2 38:17
point 8:12 11:23
12:13,20 38:23
pool 30:5
possibly 31:20
potato 20:13
potatoes 24:20
poultry 31:21
PRESENT 2:13
presented 20:15
pretty 7:23 17:10
37:13
previously 29:22
printing 7:3
prior 7:16 8:4,6
23:8
probably 15:24
16:14
problems 9:9
procedure 33:3
procedures 29:7
35:19
proceedings 40:15
41:3
process 30:15
processes 31:2
production 30:21
30:22
products 31:21
professional 31:15
property 23:20
26:9 39:12
provided 19:23
providers 9:13
Public 1:19 41:14
purchased 16:1
purposes 17:11
put 34:12
p.m 1:17 25:16
35:8 40:16

Q

Quarter 15:6

queasiness 10:16
10:20 11:24
queazy 25:19
question 5:9,12,16
30:9 31:10 36:3
questioning 6:6
questions 4:6 7:15
7:17 29:19 40:10
40:12
quite 31:10
quiz 26:5

R

raisins 13:24 14:8,9
14:16 17:18
RBK-JS 1:4
read 23:3
Ready 4:15
really 22:20 33:8
33:12 36:6 38:9
recall 6:5 22:9 28:9
38:9
recollection 19:21
20:19 27:24 32:16
35:18 36:3
recording 38:11
Reflections 18:16
19:5,17 20:7,20
20:24 21:8 24:12
24:16,19
refrigerator 14:20
regular 14:9 30:17
33:13
relative 9:9 29:19
remember 9:21,22
11:10 12:23 13:20
15:13 16:19 18:18
19:12 21:13 22:14
22:16 27:17 32:14
33:12 34:2 35:23
36:24 37:7,9,13
38:7,14,18,22
remind 19:17
repeat 5:6
reporter 1:18 5:17
5:21 41:14,22
REPORTING 1:22
represent 4:19
represented 31:4

reproduction 41:20
 require 8:10
 reserved 4:6
 respective 4:3
 respond 5:16,19
 response 38:8
 result 13:6
 rid 33:19
 right 13:15 20:3
 24:6,7 28:1 33:23
 riser 11:11
 Ritz 15:10
 Rocks 20:23
 role 30:19
 roll 25:13,22 26:2
 26:13
 room 22:18,19,19
 22:22 23:5,6,8
 26:24 27:5 34:1,5
 34:12 35:3
 roughly 8:15
 routine 21:16 27:20
 30:10
 rumbling 12:1
 25:19
 rumblings 10:16

S

safe 9:24
 salmonella 12:21
 31:17
 sandwich 18:17
 19:11 20:1,14
 sandwiches 20:6
 Sarowitz 1:14 2:7
 Saturday 10:8
 22:11 24:19 26:9
 27:13
 saying 8:6 12:18
 says 35:24
 scan 34:23
 scar 35:19
 scarring 35:17
 screaming 34:6,17
 sealing 4:3
 second 6:11 18:19
 24:13
 see 9:8,12,16 13:1
 23:4 34:16,16

35:3
 sense 5:9
 set 4:14
 Sewell 1:23
 SHEPHERD 2:2
 shocked 15:20
 shop 15:23 17:22
 sick 10:6 31:5,9,11
 31:16,16,17 36:15
 36:16
 sickness 36:12,21
 side 23:17
 similar 7:17
 Sit 23:2
 Sitting 19:20
 six 35:22 36:1,1
 slaw 20:13
 sleep 35:4
 slices 16:14
 smoke 8:20
 smoker 8:13
 smoking 8:21
 sold 7:3
 sorry 9:23 26:6
 sound 20:3,3 24:5
 Sounds 24:7 28:1
 source 17:23
 special 20:9
 specific 19:21
 38:14
 specifically 15:14
 21:13 31:23
 specifics 38:19
 specify 20:16
 spent 39:19
 Spiriva 6:10,12
 spoke 37:2,10
 spoken 22:8 39:23
 spot 23:3
 spotty 33:6,9,17,20
 Spread 11:19,20
 Springfield 6:21
 13:4 34:10,11
 Square 1:15 2:9
 start 11:7 13:12
 started 8:17 10:20
 22:12 25:19
 STATES 1:1
 stay 23:19 33:19

stayed 33:22
 stemming 9:18
 35:20
 stenographic 41:4
 step 30:15,16,16
 stipulated 4:1
 stomach 10:17 36:6
 stop 26:12,20 36:6
 stops 18:23 26:17
 store 18:8 29:24
 stores 29:21
 Street 1:16 2:4,9
 strength 6:14
 Suite 1:16 2:9
 Sunday 11:8,22
 27:23 28:3,18
 supermarket 16:1
 supervision 41:22
 suppose 10:24
 sure 5:22 26:8
 34:21,23 36:7
 37:13,23
 surgery 35:11,15
 37:1
 surprised 15:19
 swimming 30:4
 Swiss 27:3
 sworn 4:10
 symptoms 9:9,13
 10:4 11:24 12:10
 12:17 28:10,23
 32:9
 Synthroid 6:10

T

take 4:21 5:17 6:1
 13:11 17:9 22:24
 taken 41:5
 talk 22:10 24:1
 33:24 37:4 38:3
 talked 17:1,13
 27:14 36:22
 talking 21:6
 TANNER 2:2,3
 7:13 37:20
 Tanqueray 20:21
 20:22
 Tedeschi 36:22
 television 27:18

tell 5:11 18:17
 19:14,16 26:3
 31:8,15,18,23
 36:15 37:7
 test 13:2
 testified 4:11
 testimony 13:13
 Thank 40:13
 thing 18:12 19:2
 25:11
 things 5:20 10:5
 32:19 37:11 38:6
 think 23:13 27:17
 34:20
 third 26:20
 thought 23:4
 three 11:17 26:18
 30:24 34:19
 Thursday 1:10
 13:12,17 16:8,24
 17:12 29:20 30:11
 time 3:14 4:7 5:8
 6:1 7:8 8:15
 10:19 11:9,23
 14:6,23 15:4 16:3
 16:6,19 17:7,19
 19:8 20:20 21:11
 22:14,16,20,21,22
 23:4 24:16 25:14
 27:16 30:24 32:13
 33:14,18,18,21
 36:22 39:14
 times 9:16 39:2,5
 39:10,17,20
 toast 24:21,22
 today 6:20 19:20
 32:3 40:10
 told 19:10 28:17,19
 29:2 31:4,17
 34:13,22
 total 9:16
 Tower 1:15 2:9
 transcript 41:7,19
 Travel 29:16
 treatment 13:7
 32:8
 trial 4:7
 tried 35:4 40:2
 trip 29:13 36:15

true 15:15 41:7
 Trump 39:13
 trying 5:23
 Tuesday 12:14
 28:19
 tuna 18:17 19:11
 20:1,6
 two 6:24 16:14
 26:17 32:21 34:19
 type 13:7 14:20
 27:2 29:6 31:14
 38:11
 typical 13:14

U

uh-huh 5:20
 understand 5:4,5,9
 6:6 7:3 13:13
 31:10 36:2
 understood 36:11
 36:20 37:17 40:9
 UNITED 1:1
 usually 15:10,11
 17:5 21:12 24:1
 31:21 38:16

V

V 1:5
 valet 24:1
 verbally 5:19
 VICINAGE 1:2
 visit 9:19 10:5
 28:24 29:3 36:10
 vitamin 6:15
 voice 38:12
 vomited 11:13
 vomiting 11:1,4,15
 12:1,10 28:13,21

W

W 2:3
 wage 7:12,13
 wait 5:15 34:13
 waited 34:13
 waived 4:4
 walk 23:1,10,11,16
 23:17
 WALNUT 2:4
 want 5:21,22 13:10
 19:14 33:24 37:21

wanted 13:1,2 34:7 34:9,17,22,24 wash 30:14,17 washed 22:23 washing 30:10,17 wasn't 28:4 watching 27:18 water 21:1 25:10 Wawa 26:16,20 30:1 way 12:15 18:23 20:15 23:16 33:19 wear 31:1 week 12:24 weekday 13:14 WEINSTOCK 2:2 went 17:6 18:16 26:10,19,19 28:18 30:14 34:1,4,14 34:16 35:3,4 weren't 28:20 West 1:15 2:9 we'll 10:4 When's 16:3 white 24:21 wife 5:1 6:23 7:15 10:12 14:4 16:17 19:24 21:17 22:16 24:3 26:24 27:22 29:9 30:9 32:11 34:15 35:10,17 36:12,16,21 39:16 40:7 wife's 4:23 13:13 33:4 Witness 3:4 40:14 WOHLGELER... 2:2 woke 28:2 work 7:9 14:14,18 18:10 32:14,23 33:4 35:4 worked 13:14 30:23 33:1 36:16 wouldn't 20:16 35:24 wrong 10:7	X 3:2 Y yeah 34:16 year 7:4,18 8:19 years 7:1 8:3,5,17 8:23,24 Yvonne 1:4 2:13 12:24 38:3 Z Zeris 1:14 2:7 Zero 39:4 Zocor 6:12 0 06 7:16 8:4,6 29:14 30:20 31:9 32:4 35:20 36:18 39:9 07 10:1,2 32:12,13 39:24 08080 1:23 1 1st 12:5 13:12 28:19 39:24 1:08-CV-05875 1:4 1:40 40:15 10 7:18 8:23,24 10:00 35:7 11:00 24:17 11:30 24:17 11:45 18:5 12 15:6 39:10 12th 35:13 12:50 1:17 131 6:21 15 39:10 1500 1:15 2:9 16 8:17 1845 2:4 19064 6:22 19102 1:16 2:10 19103 2:4 1942 6:19 1994 9:7 1996 7:18 2 2nd 28:19	2:00 10:22 2006 4:22 7:9,19,21 9:10,18 36:10 2007 33:4,11 34:3 37:2,3 2009 1:10 41:6 215 2:5,10 24 28:22 31:11 25TH 2:3 28th 13:12,18 15:14 16:24 17:13 29 1:10 41:6 29th 17:15 21:14 22:8 3 3:00 10:23 30th 10:9,10 22:11 24:19 27:14 39:3 31 36:18 31st 28:3,18 4 4 1:22 3:6 4:00 19:9 4:30 19:9 40 7:1 4100 1:16 2:9 48 28:22 5 5:00 22:15 5:30 15:1 17:20 567-8300 2:5 589-1107 1:23 589-4741 1:24 6 6:30 25:15 7 7:00 25:15 27:23 72 28:22 31:12 735-7200 2:10 8 8 6:19 8:00 24:4 8:30 17:8 856 1:23,24	9 9:00 21:12 9:30 35:7 911 34:8 96 7:21
--	---	---	---

EXHIBIT “E”

David W. K. Acheson M.D., F.R.C.P.
14182 Day Farm Road
Glenelg, MD 21737

April 2nd, 2010

Lawrence Kelly, Esq.
Mintzer, Sarowitz, Zeris, Ledva & Meyers, LLP
Center Square, West Tower
1500 Market Street, Suite 4100
Philadelphia, PA 19102

Re: Corbi v. Harrah's Hotel & Casino, et al

Dear Mr. Kelly,

Thank you for inviting me to review the information with regard to the case of Yvonne Corbi and Joseph Corbi v. Harrah's Hotel & Casino, et al. All the opinions contained in the report are within a reasonable degree of medical and scientific certainty. However, before providing you with my thoughts and considerations in this case let me first outline my past experience in food safety and cases of food borne illness.

Having trained in internal medicine and infectious disease in the United Kingdom I spent a number of years practicing infectious disease in the UK, much of which was spent diagnosing and treating patients with food borne illness. Following that I then spent approximately 12 years undertaking basic molecular pathogenesis and epidemiology research at New England Medical Center and Tufts Medical School in Boston. During that time my focus was exclusively on microbes that cause food borne illness. This work not only involved understanding microbial behavior at the molecular and cellular level, but also focused on understanding how microbes that cause food borne illness move from the environment and into food. This work resulted in my being asked to speak internationally with regard to food borne illness and to serve on the National Advisory Committee for the Microbiological Criteria for Foods, a National advisory committee that provides scientific advice to federal food safety agencies, as well as provide advice to the World Health Organization. In 2002 I joined the U.S. Food and Drug Administration, Center for Food Safety and Applied Nutrition (CFSAN) as their Chief Medical Officer. I subsequently became the Director of CFSAN's Food Safety and Security Staff and then the Director of the Office of Food Defense, Communication and Emergency Response. In 2007 I was appointed as the Assistant Commissioner for Food Protection to provide advice and counsel to the FDA Commissioner on strategic and substantive food safety and food defense matters, and in 2008 was named Associate Commissioner of Foods in which I provided an agency-wide leadership role for all food and feed issues.

During my tenure at the U.S. Food and Drug administration I spent much of my time in a lead role dealing directly with episodes of food borne illness and large outbreaks. This involved understanding

and interpreting the epidemiology around food borne illness, and thus having to make decisions that often had a national or international impact in relation to actions around specific types of food that were thought to be responsible for a given outbreak. This process involved making a careful study of the possible food vehicles and routes of infection and recognizing that what is apparently obvious at first is not necessarily correct. Only by truly understanding the different modes in which food borne microbes, such as Salmonella, get into food and make people sick can one make sound judgments regarding food recalls or other public health actions.

I will begin my discussion of Yvonne and Joseph Corbi's illness by first documenting the facts that we know. This information is based on my review of the documents provided to me, a list of which is provided at the end of my report. Yvonne Corbi first became unwell at approximately 3pm on Saturday, December 30th, 2006. Over the following 24 hours she had episodes of diarrhea and vomiting associated with chills and abdominal pain. On January 4th, 2007 a stool sample was taken from Yvonne Corbi and was found to be positive for Salmonella enteritidis on January 6th, 2007. In the subsequent days Yvonne Corbi had a series of complications that culminated in her needing surgery that resulted in partial colonic resection and a colostomy.

Joseph Corbi first became unwell at approximately 3pm on Saturday, December 30th when he stated that he felt "queasy and had rumblings". Joseph Corbi proceeded to develop vomiting and diarrhea and was subsequently found to have Salmonella enteritidis in his stool. Even though it appears that both Salmonella isolates underwent pulsed field gel electrophoresis I am not aware if the two isolates were found to be identical. This observation raises the possibility that the two Salmonella infections are unrelated to each other.

Having determined the time of onset of symptoms for both Yvonne and Joseph Corbi as approximately 3pm on Saturday, December 30th, 2006, the next step in the process is to attempt to determine what the vehicle was responsible for their infection. Salmonella is a very common microbe and is present in the intestinal tract of many animals, birds and reptiles. It can be spread via food, water or person to person. Typically certain types of food become contaminated with Salmonella at some point in their manufacture, processing, or handling and this contamination can occur in a number of ways such as direct contact with animal fecal material, or through cross contamination in a processing environment, retail situation or a kitchen. The incubation period for Salmonella, defined as the time between when a person ingests the Salmonella to the time a person first develops symptoms, is, according to the Centers for Disease Control and Prevention between 6 hours and 10 days, with the usual incubation period of between 6 hours and 48 hours [CDC Guide to Confirming a Diagnosis in Foodborne Disease: March 2009]. Other sources suggest that the incubation period may be up to 72 hours, however I am not aware of any sources which indicate an outer bound range of incubation time less than 72 hours. The incubation period is driven by the amount of Salmonella ingested, the health and immune status of the individual exposed and other factors. Thus, to be sure one has examined every possibility it is critical to determine all possible exposures going back from the time symptoms began at least three days (72 hours) as a minimum. To be thorough one should go beyond 72 hours up to a full ten days. Failure to document a complete food history makes it impossible to determine with any level of certainty what the vehicle was that was responsible for the infection.

Given that both Yvonne and Joseph Corbi were infected with *Salmonella enteritidis* it is likely that this was due to one of two reasons. The first is that they were both exposed to a common source of infection (such as a common shared food). The second is that one transmitted it to the other. Because of the required incubation period for the infection of up to ten days, it would be unusual for one to have transmitted it to the other and for both of them to have an onset of symptoms at almost the same time. For this reason the likelihood that one transmitted it to the other is lower than that they were both exposed to a common source of infection such as a common shared food.

In order to determine the universe of possible foods that could be a source for the *Salmonella enteritidis* we need to determine which foods both Yvonne and Joseph Corbi ate at a minimum of least three days before they developed symptoms, and where they ate it. This means looking at the full food history from 3pm on Saturday December 30th back to 3pm on Wednesday December 27th, and preferably all the way back to December 20th, 2006. Unfortunately we have no records of what either of them ate at any time on December 27th or prior to that. The records of what they ate on December 28th are vague, neither Yvonne nor Joseph Corbi remembered precisely what they ate for breakfast or lunch that day. But typically this would include for Joseph cereal with milk and for Yvonne a soft pretzel or a bagel. Lunch that day was again not precisely recalled but would typically include peanut butter, crackers and fruit (apple, banana or orange) for Joseph. The records from the Pennsylvania health department did document that Yvonne had peanut butter, crackers and a banana for lunch that day. Both Yvonne and Joseph Corbi recalled eating pizza for dinner on December 28th. The food history records are also vague for December 29th around both breakfast and lunch. The PA report indicates Yvonne had Rice Krispies and milk for breakfast but it is unclear what she ate after that, other than possibly a snack of some type, until eating a Rubin sandwich later that evening. Joseph Corbi recalls eating peanut butter and crackers and fruit for lunch on December 29th. At the time of his deposition he did not remember what he ate for dinner on December 29th but reported he was told it was a tuna sandwich.

Up to this point, aside from the pizza on December 28th we simply don't know if Yvonne and Joseph Corbi shared any common food source between 3pm on December 27th, or in the days prior to that, and the morning of December 30th. They appear to share the same place of work and both were at work on December 27th, 28th or 29th. The testimony of Joseph Corbi indicates there is food kept at the work facility but we don't know who else has access to that food (either with or without the knowledge of Yvonne and Joseph Corbi), or what other types of food may have come into contact with the food kept at their work place. Similarly we have no information regarding the types of food, refrigeration or other information pertinent to being able to determine what food risks may have existed in the home kitchen of Yvonne and Joseph Corbi that may have led to a common exposure either through consumption of the same food or through a cross contamination event in which a contaminated food was able to cross contaminate a different type of food. An example of how this would occur is that Yvonne Corbi consumed some article of food that was contaminated with *Salmonella enteritidis*, and in the process of storing, preparing or serving that food the contaminated item came into contact with a different type of food that was then consumed by Joseph Corbi.

On December 30th Yvonne and Joseph Corbi reportedly shared a bagel and orange juice at the start of the day and then had a meal together in the 11am - noon timeframe. Yvonne Corbi recalls having

coffee, rye toast, one fried egg over medium and typically would share a piece of bacon from Joseph Corbi's plate, although according to Joseph Corbi's testimony he did not mention ordering bacon on this occasion. Joseph Corbi had a bagel, eggs, potatoes and white toast. Based on this information there was nothing in this meal that was a common food that they both shared. The fact that they ate the same type of food does not equate with them consuming food from a common source (i.e. sharing the same dish).

Yvonne and Joseph Corbi were both infected with *Salmonella enteritidis*. *Salmonella enteritidis* is one of the leading types of *Salmonella* causing illness in the United States and shell eggs are a recognized source of *Salmonella enteritidis*. The frequency of *Salmonella enteritidis* in eggs is considered to be approximately 1 per 20,000, with a 90% certainty interval of between 1 in 30,000 and 1 in 12,000 [Schlosser W. *Int J Food Microbiol*, 2000; 61: 51-62]. Assuming the lowest bound of 1 in 12,000 eggs positive for *Salmonella* the chances that both Yvonne and Joseph Corbi each ate an egg contaminated with *Salmonella enteritidis*, because there is no evidence they shared the eggs or that the eggs were derived from a common source, is extremely remote. Based on a contamination rate of 1 in 12,000 for Yvonne Corbi's egg and 1 in 12,000 for Joseph Corbi's egg the chance that they are both positive is in the range of 1 in 144 million (12,000 X 12,000).

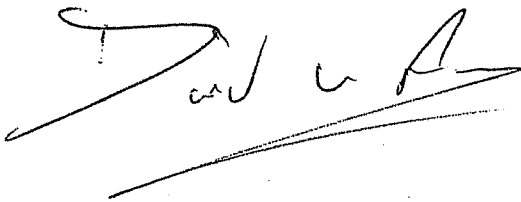
Salmonella is a common cause of food borne illness and many different types of foods have been associated with salmonella including peanut butter, ice cream, white pepper, black pepper, veggie booty, tomatoes, melons, hot peppers, poultry, ground beef, sprouts, fish, shrimp, chocolate, dried milk, puffed rice to name but a few. Eggs may be the food most frequently linked to *Salmonella enteritidis* but since Yvonne and Joseph Corbi did not share a common source of eggs prior to their illness that I am aware of, they are in one of those situations in which the food vehicle remains unknown.

The *Salmonella enteritidis* infection that Yvonne and Joseph Corbi had was not considered to be part of a large cluster of cases or an outbreak. Thus there are no other leads for one to follow with the goal of trying to triangulate the source of their exposure. The inspectors who visit Harrah's Casino consider themselves to be "very thorough", and like all food establishments nothing is perfect 100% of the time. The sanitation reports from the City of Atlantic City illustrate the thoroughness of the inspections which failed to find any clear indication that food being served to customers was contaminated with *Salmonella*.

The hard facts in this situation are few, and as often happens in cases of food borne illness, individuals who become sick frequently believe it was the last thing they ate that caused the illness. We know that both Yvonne and Joseph Corbi had salmonellosis due to *Salmonella enteritidis*. The symptoms developed approximately three hours after their last meal, and while such short incubations periods for *Salmonella* have been documented in the literature in rare cases, they are not the norm and not the most probable. In order for the both Yvonne and Joseph Corbi to develop symptoms within three hours and at the same time, one would have to assume that the dose of *Salmonella* was large and due to a common exposure. There is nothing in the records I have reviewed which indicates any recent common exposure to a food that is likely to have high levels of *Salmonella enteritidis*. In trying to determine the most likely cause of their exposure it is important to use experience and good food histories that go far

enough back in time and detail. Without such information it is impossible to make even a reasonable estimate of what was the most likely food vehicle in any given situation. I am left with only one conclusion to the question of how did Yvonne and Joseph Corbi become exposed to Salmonella enteritidis and that is we will never know.

Sincerely

A handwritten signature in black ink, appearing to read "David W. K. Acheson". The signature is stylized with a large initial "D" and a long horizontal stroke at the end.

David W. K. Acheson, M.D., F.R.C.P.

Material Reviewed

1. Plaintiff's Complaint
2. Deposition of Yvonne Corbi
3. Deposition of Joseph Corbi
4. Deposition of Dominic Tedeschi
5. Deposition of Edward Batten
6. Deposition of Migdalia Perez
7. Deposition of Theresa Bossemeyer
8. Deposition of Janet Reinhard
9. Medical records of Yvonne Corbi
10. Medical records of Joseph Corbi
11. Redacted PA-NEDSS Online Disease Reporting record for Yvonne Corbi
12. Redacted PA-NEDSS Online Disease Reporting record for Joseph Corbi
13. City of Atlantic City inspection records

EXHIBIT “F”

JAMES P. HARKINS, M.D.
3217 WEST CHESTER PIKE, SUITE B
NEWTOWN SQUARE, PA. 19073

PHONE: 610-359-8997
FAX: 610-359-0435

December 14, 2009

Mark W. Tanner, Esq.
Feldman Shepherd
1845 Walnut Street
Phila., PA 19103

RE: Yvonne Corbi

Dear Mr. Tanner:

This narrative is in follow-up to our telephone conversation of December 2, 2009 and will further elaborate on my clinical observations on Yvonne Corbi's case presentation and subsequent course, my diagnostic formulation and my opinion with respect to the causal link of the Salmonella to her acute illness.

Mrs. Corbi has been under my care since August, 1997. Prior to her acute illness with Salmonella enterocolitis in 2006-2007, Yvonne had enjoyed generally good health and was actively engaged in a printing business she ran with her husband, Joseph. Her medical management in those years was largely preventive care punctuated with the treatment of acute, uncomplicated illnesses. The one exception to this was a 2.5 year bout with polymyalgia rheumatica necessitating a course of steroids which concluded in May, 2005. Yvonne also had a history of an anxiety disorder but ultimately developed effective feedback strategies that minimized her need for anxiolytics. Specifically from a gastrointestinal standpoint, her history was remarkable only for an irritable bowel syndrome successfully managed with fiber supplements and an acute self-limited diarrheal illness in March, 2000 accompanied by a single episode of hematochezia for which she underwent a colonoscopy in May, 2000. The colonoscopy was a normal study except for hemorrhoids. It is noteworthy that Yvonne never exhibited colonoscopic evidence of, nor clinical symptoms suggestive of, diverticulitis.

On December 30, 2006, she developed the acute onset of nausea, vomiting and diarrhea several hours after eating eggs at Harrah's Hotel and Casino. Her husband who had also eaten eggs at the same meal, developed similar, though less severe, symptoms over the next day. Because of persistent diarrhea, a stool culture was ordered on 1/3/2007, performed on 1/4/2007 and reported to be positive for Salmonella on 1/6/2007. Speciation by the PA State Lab identified the organism as Salmonella enteritidis (SE). Mrs. Corbi was managed symptomatically with diet modifications and aggressive oral fluid replacement. Anti-motility agents were specifically avoided. I evaluated Yvonne in my office 1/9/2007 at which time she reported persistent post-prandial diarrhea and abdominal bloating. On exam, she was non-toxic, afebrile and without peritoneal signs though she did exhibit mild diffuse abdominal tenderness but normal bowel sounds. As

of this time, she had experienced no abdominal pain, fever or blood per rectum. White blood cell count (WBC) was normal at 7.8; potassium was low at 3.1. Symptomatic treatment was continued and a potassium supplement was ordered with plans to repeat a stool culture in one month. On 1/11/2007, Yvonne reported mucous and small blood in her stool though again she denied fever or abdominal pain. A course of antibiotic was initiated but later that evening Mrs. Corbi developed acute abdominal pain. She was evaluated emergently at Springfield Hospital where she was found to have an acute abdomen and a low-grade fever. WBC was elevated at 18.0 and a CT scan of abdomen and pelvis showed severe colitis involving the descending colon with transmural necrosis and pneumoperitoneum, probable involvement of the transverse colon and cholelithiasis. Marked pericolic inflammatory changes were noted but there was no evidence of diverticulitis. The celiac trunk and the superior and inferior mesenteric arteries were noted to be grossly patent as were the portal veins and the superior and inferior mesenteric veins. On 1/12/2007, Mrs. Corbi underwent an emergency laparotomy and resection of the descending and proximal sigmoid colon by Robert McGarrigle, DO. At the time of surgery the descending and proximal sigmoid colon were adhered to the lateral pelvic wall and a 1.5 foot section of colon demonstrated inflammation, necrosis and a perforation.

Post-operatively, Yvonne had an uneventful course. She received intravenous antibiotics appropriate for the intra-operative cultures of the peritoneal fluid and her diet was advanced. Though her stool culture remained positive for Salmonella on 2/21/2007, a follow-up culture on 4/20/2007 was negative allowing for a laparoscopic colostomy closure (Hartman reversal) on 5/23/2007 by Dr. Robert Noone. A pre-operative colonoscopy performed by Dr. Noone showed no diverticulosis in the remaining colon.


Following the Hartman reversal, Mrs. Corbi struggled for several months with abdominal bloating and altered bowel function manifested by alternating diarrhea and constipation. It is my opinion that the stress of the Salmonella enterocolitis and the related complications did aggravate Yvonne's anxiety disorder, necessitating a renewed need for anxiolytics. Her irritable bowel syndrome was also exacerbated. A severe episode of abdominal distress on 9/19/2007 necessitated emergency evaluation at Lankenau Hospital. Though this episode could be treated on an out-patient basis, she nonetheless, required several months of gastroenterology follow-up with Dr. Giancarlo Mercogliano during which she was treated with a progression of fiber supplements, anti-spasmodics, probiotics and diet modification. Not until February, 2009 did she report good symptom control. After two years of clinically significant gastrointestinal symptoms and the quality-of-life diminution inherent therein, Mrs. Corbi recovered. However, with the history of a bowel perforation with peritonitis and the two surgeries which followed, Yvonne faces a significant lifetime risk for intestinal adhesions and secondary bowel obstruction.

Review of Mrs. Corbi's clinical presentation and the record of her hospitalization at Springfield Hospital leads me to conclude with a reasonable degree of medical certainty that the Salmonella infection did cause the severe colitis involving her descending colon and directly led to the colonic perforation and peritonitis. Although

most patients with Salmonella present with milder self-limited symptoms of nausea, vomiting and diarrhea, colonic involvement dominates the clinical picture in a small subset of patients.(1) In a complex interplay of host-pathogen factors, SE can evoke an inflammatory reaction in the colon marked by mucosal adherence and invasion by the pathogen triggering the massive infiltration of polymorphonuclear cells into the colonic wall and release of toxic substances which damage the colonic mucosa.(2,3) Indeed, toxic megacolon and perforation due to Salmonella, though rare, may ensue.(4) The diffuse inflammatory changes in the descending colon and transverse colon apparent on the CT scan and verified in the gross findings at surgery are much more consistent with a diffuse inflammatory process such as an infectious colitis and not diverticulitis. Again, as previously stipulated, the CT scan showed no evidence of diverticulitis.

Lastly, the time-line of Mrs. Corbi's illness (as well as that of her husband) with respect to the consumption of eggs at Harrah's Hotel and Casino on 12/30/06 makes a compelling case that the eggs were the source of the Salmonella. Epidemiologically, infected eggs are the most common food source of SE. As such, with a reasonable degree of medical certainty, it is my opinion that the Salmonella enterocolitis was caused by the eggs consumed at Harrah's Hotel and Casino.

Sincerely yours,



James P. Harkins, M.D.

References:

- (1) Sleisinger & Fordtran's Gastrointestinal and Liver Disease, 7th Edition (2002) Chapter 96
- (2) Harrison's Principles of Internal Medicine, 16th Edition (2005) Chapter 137
- (3) Principles & Practice of Infectious Disease, Mandell Bennett Dolin 6th Edition (2005) Chapter 89
- (4) Deppisch LM, Grans CA. Salmonellosis: a cause of toxic megacolon J Clin. Gastroenterol. 12:605, 1990

JAMES P. HARKINS, M.D.
3217 WEST CHESTER PIKE, SUITE B
NEWTOWN SQUARE, PA. 19073

PHONE: 610-359-9997
FAX: 610-359-0438

December 13, 2009

Mark W. Tanner, Esq.
Feldman Shepherd
1845 Walnut Street
Phila., PA 19103

RE: Joseph Corbi

Dear Mr. Tanner,

This narrative – a companion report to that on Yvonne Corbi – is in follow-up to our telephone conversation of December 2, 2009 and will detail my clinical contact with Mr. Joseph Corbi relating to his Salmonella gastroenteritis in January, 2007 as well as my opinion as to the source of this infection.

Mr. Corbi has been under my care since July, 1999. Throughout this period he has enjoyed a compensated medical status and an active lifestyle that included the operation of a printing business. His medical care largely centered on control of his hypertension, hyperlipidemia, chronic bronchitis and lumbar disc disease.

At the time of his quarterly follow-up with me on 1/9/2007, he reported a few days of diarrhea starting on 12/31/2006, just after the onset of an acute diarrheal illness in his wife on 12/30/2006. Mrs. Corbi was ultimately diagnosed with Salmonella on 1/6/2007. Of note, they had both consumed eggs at Harrah's Hotel and Casino on 12/30/06 prior to symptom onset. Joseph denied nausea, vomiting and abdominal pain, and though his symptoms had largely resolved, I advised a stool culture to check for Salmonella. On 1/15/2007, Mr. Corbi reported low-grade nausea, abdominal bloating and mild recurrent diarrhea. His wife had been hospitalized on 1/11/2007 with a fulminant Salmonella colitis culminating in a colonic perforation with peritonitis and he was under significant emotional stress. Symptomatic treatment was advised and I again recommended a stool culture. Salmonella was identified from a 1/16/2007 specimen and the PA State Lab speciated it as Salmonella enteritidis (SE) on 1/19/2007. By this time, Joseph reported significant improvement. A follow-up culture on 2/13/2007 was negative for Salmonella.

Mr. Corbi's clinical presentation and subsequent course were entirely consistent with the diagnosis of Salmonella gastroenteritis. Typically patients present with self-limited nausea, vomiting and diarrhea 8 to 48 hours following the ingestion of infected food. Infected poultry eggs are the most common food source for Salmonella. Symptoms usually subside within 7 days and a full recovery is the norm. Mr. Corbi did achieve a full recovery without clinical sequelae.

From an epidemiologic standpoint, when viewed in conjunction with his wife's illness, it is my opinion with a reasonable degree of medical certainty, that the eggs consumed at Harrah's Hotel and Casino were the source of the SE that resulted in his illness.

Sincerely yours,

James P. Harkins, M.D.

James P. Harkins, M.D.

**JAMES P. HARKINS, M.D.
CURRICULUM VITAE**

BORN: Philadelphia, PA 7/17/1955

EDUCATION: Bucknell University, Lewisburg, PA
December, 1976
Summa Cum Laude, B.S. Biology

POST-GRADUATE: University of Pennsylvania
School of Medicine
1977 to 1981, Doctor of Medicine

Internship 7/1981 to 7/1982
Internal Medicine
Lankenau Hospital, Wynnewood, PA

Residency 7/1982 to 6/1984
Internal Medicine
Lankenau Hospital, Wynnewood, PA

EMPLOYMENT HISTORY: Internal Medicine – self-employed in Clinical
Practice 7/1/1984 to 12/31/1995

Active Medical Staff – Lankenau Hospital
Wynnewood, PA 7/1/1984 to present

Great Valley Health Physician
Internal Medicine 1/1/1996 to 12/31/2000

Medical Director, Employee Health
Lankenau Hospital, Wynnewood, PA
1988 to 6/4/2004

Staff Physician, Employee Health Department
Bryn Mawr Hospital, Bryn Mawr, PA
9/2000 to 9/2005

Internal Medicine – self-employed in Clinical
Practice 1/1/2001 to present

12/15/2009

EXHIBIT “G”

December 2, 2009

Mark W. Tanner, Esq.
Feldman Shepherd
Trial Lawyers
25th Floor
1845 Walnut Street
Philadelphia PA 19103

RE: Corbi v. Harrah's Hotel and Casino

Dear Mr. Tanner:

Thank you for asking me to review this case on behalf of Plaintiffs, Yvonne Corbi and Joseph Corbi. I believe that I am in a good position to offer an expert opinion on this case. I am Board Certified in Internal Medicine and Infectious Diseases. I have had extensive clinical experience in Infectious Diseases and currently serve as Section Chief of Infectious Diseases at Boston Medical Center. I have contributed over 250 articles to the peer-reviewed scientific and clinical literature.

My comments are based on my review of the following medical records and depositions and a review of the relevant literature:

1. Medical Records Yvonne Cori from James Hawkins, M.D.
2. Medical Records Joseph Corbi from Joseph Corbi, M.D.
3. Medical Records Yvonne Corbi admission to Springfield Hospital, January 11-21, 2007
4. Medical Records Yvonne Corbi admission Lankenau Hospital, May 23-29, 2007.
5. Medical Records Yvonne Corbi from Robert B. Noone, M.D.
6. Narrative report of Robert B. Noone, M.D.
7. Yvonne Corbi's answers to Defendant's discovery
8. Joseph Corbi's answers to Defendant's discovery
9. Deposition of Yvonne Corbi
10. Deposition of Joseph Corbi
11. Deposition of Dominic Tedeschi
12. Deposition of Edward Batten

Summary:

Mrs. Corbi was 64 years old and in excellent general health when on December 30, 2007 while at Harrah's Casino and Hotel in Atlantic City she developed nausea, vomiting and diarrhea. Because of persistent diarrhea she had a stool culture January 4 which yielded *Salmonella enteriditis*. The diarrhea decreased in frequency but persisted post-prandially. She was

Mark W. Tanner, Esq.
 Feldman Shepherd
 Trial Lawyers
 Page 2

evaluated by Dr. Hawkins on January 9 at which time she was afebrile, her abdomen was soft and nontender. On January 11 she noticed mucus and bright red blood in her stool and developed abdominal pain. Later in the evening she became fulminantly ill with vomiting and blood diarrhea. She was brought to the Emergency Room of Springfield Hospital by ambulance where she had a low grade fever (99.8). Abdominal examination showed tenderness in the left lower quadrant with peritoneal signs; WBC count was 18,000. A CT scan of the abdomen was performed with the findings of severe colitis of the descending colon with transmural necrosis and pneumoperitoneum (first reported on re-reading January 12). Emergency laparotomy was performed and a 1.5 foot section of descending and proximal sigmoid colon was resected. The pathologic examination showed the colon to be inflamed with necrosis and a perforation. The peritoneal fluid was "purulent" and Gram's stained preparation showed 2+ gram negative rods. On culture the peritoneal fluid yielded *Streptococcus milleri*, *Bacteroides fragilis*, *Bacteroides uniformis*, *C. clostridiform*, *Provetella loeschii* and growth of *Torulopsis glabrata* from broth only. The patient was treated with Rocephin and Flagyl and recovered. Her stools were intermittently positive for *S. enteriditis*. On 5/23 she had reversal of the colostomy. A stool culture from Joseph Corbi obtained on or about January 9 also yielded *S. enteriditis*.

Epidemiology

Ms. Corbi became symptomatic Dec 30 at approx 3PM. The food intake history will be considered relative to this time zero and only food common to both Corbi's will be noted. Mr. Corbi began to feel ill later that afternoon and into the following day.

-4hrs. eggs over medium, bacon (Harrah's)

-8 hrs. bagel with cream cheese, coffee with cream (Harrah's)

-17 hrs. coffee with cream, danish (Harrah's)

-45 hrs. cheese pizza (not Harrah's)

Salmonella enteriditis (SE) is a common cause of food-borne outbreaks. Because it usually causes mild illness it is estimated that only 1% of cases are diagnosed correctly (Chalker). In fact, in 2006, it was the most common *Salmonella* serotype associated with outbreaks and salmonella was the most common bacterial pathogen (CDC). During an outbreak, only 10% of symptomatic individuals reported their illnesses voluntarily (Lin). Correspondingly, outbreaks must be very large or associated with severe cases in order to be detected. In fact, only 6.1% of salmonella cases were part of a recognized outbreak (MMWR 2006). Some of the apparently sporadic cases are assumed to be part of outbreaks that were not recognized. About 82% of cases of SE are caused by ingestion of contaminated eggs or egg products (Mishu). SE is transferred trans-ovarially from hen to egg. Approximately 1 in 10,000 shelled eggs is contaminated (Hope). Cracked or soiled eggs are particularly likely to be conduits as are batched eggs. In addition to contamination of the raw egg, the food must be under-cooked to cause disease.

While the usual incubation period is reported as 8-48 hours, the incubation period may relate to the size of the inoculum. High inocula are associated with shorter incubation periods and more

Mark W. Tanner, Esq.
Feldman Shepherd
Trial Lawyers
Page 3

severe disease (Blaser). In food-borne outbreaks, symptoms have started within as few as 3 hours (Kaku).

In the normal host SE usually causes a self-limited gastroenteritis. There are, however, reported cases of toxic megacolon with colitis (Chaudhuri) as well as pseudomembranous colitis (Bernal Cuartas). It also is well-established that SE can be associated with an inflammatory colitis indistinguishable from ulcerative colitis (Dronfield, Rodriguez).

Synthesis

There is no doubt that Ms. Corbi developed colitis and its complications because of the *Salmonella enteritidis* infection. Given the severe nature of the colitis and the fact that both Corbi's were infected after a single food exposure the exposure was likely to be intense and the incubation period short. Whereas any of the foods that she consumed at Harrah's could theoretically have been the cause, either directly or through cross-contamination, the eggs over medium seem most likely to be culpable. Both Mr. and Mrs. Corbi consumed the eggs and this is the most common source of transmission of SE. Given the fact that only 1% of cases of salmonella are diagnosed correctly and that only 10% of symptomatic individuals seek medical attention, the fact that there were insufficient cases and severe cases to trigger an outbreak investigation at Harrah's is in no means surprising. One can rule out the pizza ingested by both Corbi's as relevant given the long period between eating the pizza and symptoms and the fact that pizza has never reported to be a cause of disease due to *Salmonella enteritidis*.

Opinion

Therefore, it is my opinion, to a reasonable degree of medical certainty that Ms. Corbi's colitis with perforation was caused by food eaten at Harrah's Hotel and Casino.

References

- Blaser MJ. Rev Infect Dis 1982; 4:1983
- Dronfield MJ, Brit Med J 1976;1:99.
- Rodriguez LAG Gastroenterology 2006; 130:1588.
- Chaudhuri A. Int J Colorect Dis 2002; 17: 275.
- Kaku M, et al. Rev Saude Publica 1995; 29:127.
- Lin F-YC, et al. Amer J Epidem 1988; 128:839.
- Bernal Cuartas C, et al. An Pediatr (Barc) 2006; 65:639.
- Hope BK, et al. Risk Anal 2002; 22:203.
- Chalker RB, et al. Rev Infect Dis, 1988;10: 111.
- Mishu B, et al. J Infect Dis 1994; 169: 547

Mark W. Tanner, Esq.
Feldman Shepherd
Trial Lawyers
Page 4

CDC. MMWR 2009; 58: 610.

CDC. MMWR 2006; 56:336.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Jerrold Ellner, M.D.", with a stylized flourish at the end.

Jerrold J. Ellner, M.D.
725 Harrison Avenue
Unit E 304
Boston MA 02118